NOV 06

PTO/SB/17 (10-08) Approved for use through 06/30/2010. OMB 0651-0032								
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Effective on 12/08/2004.			4040	Complete if Known				
ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		_	Application Nur	nber	10/822	. 257		
FEE TR	ANS		∖∟ [Filing Date		APLIL 10	2004	
For FY 2009				First Named Inv	entor/	ROBIN S	GRAY	
Applicant claims small entity status. See 37 CFR 1.27			27	Examiner Nam	е	Kelly M.	AHAFKEY	
				Art Unit		1794	<u> </u>	
TOTAL AMOUNT OF PAY	MENT (\$	270.00		Attorney Docke	t No.			
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account Deposit Account Number: Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments								
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
		SEARC	CH FEES EXAMINATION FEES					
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)	
Utility	330	165	540	<u>Fee (\$)</u> 270	220	<u>Fee (\$)</u> 110	1000 1 010 101	
•	220							
Design		110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$)								
<u>Fee Description</u> Each claim over 20 (including Reissues)						52	<u>Fee (\$)</u> 26	
Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues) 220 110							= -	
	Multiple dependent claims						195	
· · · · · · · · · · · · · · · · · · ·			Fee F	Paid (\$)		Multiple De	pendent Claims	
20 or HP = x = <u>Fee (\$) Fee Paid (\$)</u>								
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims								
HP = highest number of independent claims paid for, if greater than 3.								

3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets

Extra Sheets

Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) __ (round up to a whole number) x - 100 = / 50 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 270.00 Other (e.g., late filing surcharge) NOTICE OF APPEA

SUBMITTED BY Registration No. Telephone Signature 093 (Attorney/Agent) Date Name (Print/Type) 6/08

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NOV 0 6 2008

PTO/SB/21 (10-08) Approved for use through 11/30/2008, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number Filing Date TRANSMITTAL First Named Inventor **FORM** Art Unit **Examiner Name** KElly (to be used for all correspondence after initial filing) Attorney Docket Number 5 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC X Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Signature Printed name Date Reg. No. November 6 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Date 2008 Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

name

Z.

*Total of

11-07-0X

PTO/SB/31 (10-08)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Docket Number (Optional) NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES In re Application of I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Application Number "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-10/822,257 1450" [37 CFR 1.8(a)] FOOD CONDIMENT, COMPOSITION, METHOD OF 2008 LEVEMBER 6. For MOLDING AND METHON OF USING Signature Examiner Art Unit 1794 KEILY MAHAFKE Typed or printed Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: A check in the amount of the fee is enclosed.

_								
Z	Payment by credit card. Form PTO-2038 is attached.	11/07/2000 LHOUVEHA 22000000 ADADOCTO						
	The Director has already been authorized to charge fees in this application to							
	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No							
	A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.							
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
am t	the	Vis & Many						
X	applicant/inventor.	Signature Signature						
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Typed or printed name						
区	attorney or agent of record. Registration number	(416) 418 - 4754 Telephone number						
	attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34.	NOVEMBER 6, 2008						
NO	OTE: Signatures of all the inventors or assignees of record of the entire interes	t or their representative(s) are required.						

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO Inis collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. P.O. Box 1450, Alexandria, VA 22313-1450. FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Submit multiple forms if more than one signature is required, see below*

forms are submitted.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Robin S. Gray Group Art Unit: 1794

Serial Number: 10/822,257 Preliminary Classification: 426

Filing Date: April 10, 2004 Examiner: Kelly Mahafkey

Title: FOOD CONDIMENT, COMPOSITION,

METHOD OF MOLDING, AND METHOD

OF USING

NOTICE OF APPEAL

Date: November 6, 2008

Honorable Commissioner for Patents Washington, D.C. 20231

SIR:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the Examiner in reference to the above-identified application. A Notice of Appeal and corresponding fee is enclosed herewith.

Respectfully submitted,

Robin S. Gray

Registration No.: 48,093

I hereby certify that this correspondence is being deposited with the United States Postal Service as <u>Post Office To Addressee with</u>

<u>Express mail label Number: EB 363114594 US</u> addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria Virginia
22313-1450, on November 6, 2008.

Robin S. Gray

Applicant

Signature

November 6, 2008

Date of Signature